MIPS Participation for Medicare Shared Savings Program
Track 1 Accountable Care Organization Members
MACRA Final Rule Guide

On October 14, 2016, CMS released the final rule on the Quality Payment Program (QPP), which includes both the Merit-Based Incentive Payment Program (MIPS) and Advanced Alternative Payment Models (APMs). The final rule establishes regulations on the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), signed into law in April 2015. The new law changes the way Medicare incorporates quality measurement into payments and develops incentives for participation in alternative payment models.

This guide provides information on how Medicare Shared Savings Program (MSSP) Track 1 Accountable Care Organization participants will be scored for MIPS under the MIPS APM scoring standard. A MIPS APM is either a payment model that does not meet the definition of an Advanced APM—such as Track 1 ACOs—or is an Advanced APM that has not met patient or revenue thresholds. ASCRS has also developed guides on the full QPP, each of the four components of MIPS, and Advanced APMs and will continue to provide additional resources and training materials to assist ASCRS•ASOA members in complying with the program, which began January 1, 2017, for payment January 1, 2019.

MIPS APM Scoring Standard

Track 1 ACOs do not meet the definition of an Advanced APM. Therefore, participants in those models are not eligible to receive the statutory 5% bonus that MACRA provides, and must participate in MIPS. CMS defines an Advanced APM as a model that involves two-sided risk, and since Track 1 ACOs do not involve down-side risk, they cannot be considered Advanced APMs.

However, CMS has created a MIPS scoring standard for participants in certain alternative payment models that do not meet the definition of an Advanced APM (such as Track 1 ACOs), or do not meet the required participation or revenue thresholds. The MIPS APM scoring standard allows physicians to continue participating in these models, and to use that participation to earn credit under MIPS.

How do Track 1 ACO Members Participate in MIPS?

To earn points in MIPS under the MIPS APM scoring standard, a provider in a Track 1 ACO must be included in the official participant list of the ACO filed with CMS.

Track 1 ACO participants are required to:

- Report the required quality measures for the ACO through their ACO entity (if the ACO does not report data on behalf of its members, those physicians will be required to report quality data on their own);
- Report data for the Advancing Care Information category on their own; and
- Automatically earn all of the total available points for the Improvement Activities category score.

Track 1 ACO Scores Under the MIPS APM Scoring Standard

CMS will award the same final MIPS score to all the participants in a Track 1 ACO—including for data they reported individually or as a group under a single TIN. Under the terms of the model, participants in the APM entities are already assessed collectively for meeting certain quality and cost metrics; therefore, CMS will score the Advancing Care Information
category collectively as well. All ACO participants will receive the total points for the Improvement Activities category. CMS will use an average score of all the participants’ scores for Advancing Care Information to determine a score for all participants. All participants in the Track 1 ACO will also receive the same total available score for Improvement Activities.

Under the MIPS APM scoring standard, CMS has re-weighted the MIPS categories to reflect the design of the Track 1 model. For 2017, category weights are: 50% Quality, 0% Cost, 20% Improvement Activities, and 30% Advancing Care Information.

The ACO entity’s final MIPS score will be applied to the participants in the entity at the TIN/NPI level. If a physician participates in multiple ACOs or other MIPS APMs, CMS will award separate scores for each entity. CMS will use whichever score is highest to determine the physician’s payment adjustment.

**MIPS APM Participation**

Physicians may participate in Track 1 ACOs at the individual or group level. Not all physicians billing under a particular TIN are required to participate in the ACO entity if one or more physicians billing under that TIN elects to participate. Certain specialties, such as ophthalmology, are permitted to participate in more than one ACO.

CMS will determine providers’ eligibility to be scored under the MIPS APM scoring standard by checking three times during the performance year to confirm that individuals or groups are listed on the ACO or other APM entities’ participant lists. **CMS will check the lists on March 31, June 30, and August 30 of the performance year.**

If a provider is on the list at any time, he or she will be considered as participating in the entity. If a provider only participates in the APM entity for a portion of the year, but is only on the list at one or two of the designated dates on which CMS checks the list, he or she is still considered a participant.

**Additional Resources**

For additional information, you may contact Allison Madson, manager of regulatory affairs, at amadson@asco.org or 703-591-2220.